COMMISSION ON MENTAL HEALTH AND DEVELOPMENTAL SERVICES

FRIDAY, JUNE 14, 2002

MEETING LOCATION:

LEGISLATIVE COUNSEL BUREAU – CARSON CITY AND VIDEO TELECONFERENCE GRANT SAWYER OFFICE BUILDING – LAS VEGAS

MINUTES

COMMISSIONERS PRESENT AT THE CARSON CITY LOCATION:

Frances Brown, MSN, MSEd. RN, Chair David Ward, Vice Chair Eric Albers, Ph.D.

COMMISSIONERS PRSENT AT THE LAS VEGAS LOCATION:

John Brailsford, Ph.D. Johanna Fricke, M.D. Rena Nora, M.D. Elizabeth Richitt, Ph.D.

CALL TO ORDER

Chair Brown called the meeting to order at 9:20 A.M.

APPROVAL OF MINUTES

MOTION: Dr. Nora made a motion to approve the April 19, 2002 meeting minutes as submitted, seconded by Mr. Ward. The motion passed unanimously.

INTRODUCTIONS

Dr. Carlos Brandenburg introduced Jonathan Andrews, Deputy Director for the Department of Human Resources. Dr. Brandenburg encouraged Commissioners to contact Mr. Andrews if they have any questions or concerns. Mr. Andrews stated that he would be attending the Commission meetings and informing Mr. Willden, Director of Department of Human Resources, of Commission issues.

Mr. Andrews stated that he was pleased to be at the Commission meeting and is looking forward to working with the Commission.

Ms. Debbie Hosselkus introduced Ms. Georgia J. Rohrs, as the new Administrative Services Officer IV for the Division of Mental Health and Developmental Services. Ms. Rohrs reviewed her education and experience background for the Commission.

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CRISIS CALL CENTER

Ms. Misty Allen, Crisis Call Center, reported that they have sent information on training manuals to Dorothy Bryant at the Suicide Prevention Center of Clark County to assist them in obtaining certification.

Ms. Allen stated that the Crisis Call Center has recently expanded with more staff and volunteers to meet the increasing need and number of calls.

Commissioner Ward questioned the 2-1-1 national incentives and wondered if this was something that would be useful to the Crisis Call Center. Ms. Allen stated that she explored this area about two (2) years ago, wrote a proposal, but this issue was placed on the back burner until the Statewide Suicide Prevention Hotline was up and working. Ms. Allen feels that this is a project that the Crisis Call Center should be looking into in the near future.

Ms. Allen stated that the Crisis Call Center Board of Directors decided to become more proactive with the State, in any capacity, to search for Board Members in the South and possibly a staff position in the South. The Legislative Subcommittee on Suicide Prevention is recommending, with the Governor's support, two (2) staff positions and the suicide prevention plan for Nevada.

Dr. Albers expressed concern regarding accreditation for the Suicide Prevention Center of Clark County. Ms. Allen stated that the Suicide Prevention Center of Clark County has applied for the extensive accreditation process, and she has provided information to Dorothy Bryant to assist in the accreditation process. Ms. Allen stated that the State Crisis Call Center and the Suicide Prevention Center of Clark County are two separate entities.

Dr. Brandenburg stated that Ms. Allen has tried, on numerous occasions, to partner with the Suicide Prevention Center of Clark County and that they have shown no interest in a partnership. Dr. Brandenburg stated that he has requested that Ms. Allen consider expanding her role in Clark County because the current system is inadequate and does not meet needs of the community.

Dr. Nora stated that Suicide Prevention Center of Clark County has funding problems and at least the application process has begun. Dr. Nora thanked Ms. Allen for providing information to the Suicide Prevention Center of Clark County.

Ms. Allen stated that Suicide Prevention Center of Clark County needs its own accredited crisis center.

AGENCY DIRECTORS' REPORT

Crisis Call Center

Ms. Allen stated that the "Hike for Hope" fund-raiser held on May 11, 2002, at the Hidden Valley Regional Park was very successful. This will be an annual event during Mental Health Awareness Month.

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Ms. Allen stated that the Board of Director's retreat was tomorrow, June 15, 2002, for Strategic Planning. Ms. Allen asked if there was any direction from the Commission for her to take to the Board. Mr. Ward stated that he would like to make it simpler for individuals to call. Dr. Albers would like to see a co-leadership role with the Suicide Prevention Research Center (SPRC).

It was indicated that Nevada has the ONLY statewide, state-funded crisis center.

INTRODUCTIONS

Dr. Brandenburg introduced Mr. Mike Willden, Director of the Department of Human Resources.

Mr. Willden stated that he appreciated the work of the Commission and either himself or one of his staff will attend Commission meetings. Mr. Willden updated the Commission with regards to the Department of Human Resources' Strategic Plan and stated that there is a tremendous amount of good work currently being done.

JCAHO ACCREDITATION UPDATE

Dr. Christa Peterson reported on the survey that was done by the Joint Commission for Desert Willows. Desert Willows obtained JCAHO accreditation with a score of 96 out of 100. The surveyor was very impressed with the programs. There were a few issues that needed corrective action: 1) need more specificity within the documentation of the annual evaluation of the safety management plan; 2) documentation of the weekly testing of emergency power measurements; and 3) make sure that physicians orders are signed and dated in a timely manner.

Dr. Peterson commended staff members Ms. Vickie Miller, Acting Program Manager, and Dr. Elizabeth Tully, Medical Director, on the survey preparation process.

The Commission congratulated Dr. Peterson on the JCAHO accreditation.

Dr. Peterson indicated that she would distribute, to the Commission, the formal reporting from JCAHO when it is received.

BDR SUMMARY/UPDATE

Ms. Debbie Hosselkus stated that the Mental Health Division submitted three (3) bill draft requests to the Governor's Office. To date, there have been no confirmations of acceptance. The three bill draft requests are: 1) To establish certification for all examiners who provide forensic evaluations for the Nevada courts regarding competency; 2) Make consistent the definition of mental illness throughout the Nevada Revised Statute and clarifies treatment for competency and involuntary administration of medications as part of the process of determining competence or incompetence in a criminal proceeding and clarifies the 72-hour hold; and 3) Allow psychiatric nurses to distribute medications in rural mental health clinics.

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Upon questioning by Dr. Richitt, Dr. Neighbors reviewed the certification qualifications to determine competency. Dr. Neighbors stated that a proposed policy has been written and was fashioned after the Alabama statute. The specific training is currently listed in Nevada Revised Statutes and those requirements will remain the same.

Dr. Brandenburg stated that the purpose of the bill draft request is to standardize the requirements for every examiner who performs a competency evaluation and that they have been certified by the state as having the expertise and the competence to do evaluations.

BUDGET UPDATE

Georgia Rohrs stated that the next Interim Finance Committee meeting would be on June 18, 2002. The Division has 13 work programs pending, in an attempt to balance the year-end budget. There is a request from the contingency fund, to correct a shortfall of approximately \$400,000 in the rural clinics budget.

Ms. Rohrs stated that the budget building process is beginning. The agency budget needs to be to Department of Human Resources in August and to the Budget Office and Legislative Counsel Bureau by September 1. In January, the Governor's recommended budget will be released and the Legislative Session will begin in February.

Dr. Albers questioned why there has not been a DCFS budget update.

ACTION: Dr. Brandenburg stated that he would request that Mr. Cotton provide a budget update at the next Commission meeting.

Mr. Willden stated that the DCFS budget had some funding shortfall and needed budgetary attention by the next Legislature. Mr. Willden stated that he is working with DCFS to address the problems. There has been difficulty in obtaining TANF monies, as welfare cases have increased and there have been cash flow problems. Mr. Willden assured the Commission that he is working to correct the problems. Mr. Willden stated that he would make sure that someone from DCFS is at the next Commission meeting to give a budget update.

Dr. Brailsford stated that he appreciates the budget reports, as the information allowed the Commission to take a position to help out the agencies when needed.

MENTAL HEALTH CONSORTIUM UPDATE QUARTERLY PROGRESS REPORTS (1/02 – 3/02) AND MEMBERSHIP LISTS

Mr. Les Gruener, on behalf of Dr. Peterson, stated that the Commission had requested the Consortium's quarterly reports as well as their membership lists. Mr. Gruener stated that the information was included in the Commission packets.

Mr. Gruener stated that the Consortiums are meeting regularly to develop an Annual Plan to meet the mental health needs of children in each of the respective regions. The Annual Plans will be complete by June 21, 2002.

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ACTION: Mr. Gruener will share the Annual Plans with the Commission at the next Commission meeting.

Dr. Albers questioned how the Consortiums would work with the Commission. Mr. Gruener stated the process is still taking shape and it is still unclear as to the relationship that the Consortiums will have with the Commission.

ACTION: Mr. Gruener suggested that a report from the Consortiums be a continuing agenda item at every Commission meeting to update to Commission on the Consortiums' activities.

Mr. Ward questioned if the Rural Consortium is meeting in various rural locations. Mr. Gruener stated that the Rural Consortium is trying to move the meeting locations around the State and they are also getting a survey/information out to rural communities to involve as many individuals as possible.

AGENCY DIRECTOR'S REPORT

DCFS

Dr. Albers expressed concerns with regards to the number of children on the waiting list and what happened to those children. Mr. Gruener, DCFS, stated that when screening calls are received, they are attached a triaged rating and DCFS looks at what the status need of those children (acute, moderate or low level). The children most in need will receive services first and the children in the moderate or low levels are referred to other agencies/community programs. The triaged list is reviewed every week.

Mr. Gruener stated that the state hiring freeze has limited the number of staff. To fill a vacant position takes a justification process to get that position approved to hire.

ACTION: Dr. Brandenburg requested that there be a standing agenda item on each Commission agenda for an update from each Consortium.

Dr. Fricke expressed concern with regards to parents having difficulty getting callbacks and not being able to get appointments to get their children assessed as to whether or not they qualify for regular Medicaid under the heading severely-emotionally disturbed and therefore qualify for services for Mojave Mental Health. Mr. Gruener stated that those issues are being discussed with Medicaid. DCFS is working with Medicaid and the HMO provider to have the families go directly to the HMO provider. As of July 1, 2002, the process will be changing for the positive.

ORYX PRESENTATION

Dr. David Rosin stated that in 1997 the Joint Commission on Accreditation decided that it would be worthwhile to measure instructional outcomes for like institutions. All JCAHO accredited joint commission facilities are required to participate in the ORYX program. ORYX measures the number of restraint hours and the percent of clients that are restrained, the number of seclusions hours and the percent of clients secluded and the 30-day readmission rate (percentage of admissions to a facility that occur within 30 days of the previous discharge).

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Dr. Rosin stated that Nevada's rate is favorable to the national average and is in fact better than the national average.

Dr. Brandenburg stated that it is good to collect data and more important to see how Nevada compares nationally. The collection of the data is of the same type of information and is shared in a confidential manner. Dr. Brandenburg stated that this is helpful information for the Commission to review to see how Nevada compares nationally.

In response to the confusion as to when the Commission should close a public meeting and enter into a closed session, Deputy Attorney General Irvin reviewed NRS 433.534. Mr. Irvin stated that the Commission may close any portion of a meeting in which it considers the character, alleged misconduct, or professional competence of a person in relation to the denial of rights of a client or the care the treatment of a client.

Dr. Albers questioned getting reports from private institutions. Dr. Brandenburg stated that he would try to get information from the private institutions. Mr. Ward stated that Mr. Irvin has had past success in obtaining information from the private institutions.

ACTION: Dr. Brandenburg will request information from private JCAHO institutions, through Deputy Attorney General Ed Irvin.

A break was granted at 10:45 A.M. The meeting reconvened at 11:05 A.M.

MENTAL HEALTH PLANNING ADVISORY COUNCIL REPORT

Alyce Thomas, Chair for the Mental Health Planning Advisory Council, stated that the Council has been very busy. The Council has been gearing up for the Legislative Session. The Council has appointed Chair Jenita Rodriquez to lead a Legislative Subcommittee that will be focusing on issues that were identified in the joint commission meeting in February.

Ms. Thomas stated that the monitoring visit from Community Mental Health Services (CMHS) went very well and they are very pleased on how we do business in Nevada. The Nevada's Block Grant proposal was so well written that they are using Nevada's proposal as an example of how a Block Grant proposal should be written.

Ms. Thomas stated that she attended the National 2002 CMHS Technical Assistance Conference in Washington D.C., along with six individuals from Nevada. Ms. Thomas stated that it was a worthwhile conference. Ms. Thomas also attended the National Mental Health Association Conference, where she presented on Consumer Empowerment and discussed Nevada's CMHS Block Grant. Nevada is unique in that the Block Grant funding is controlled by the Council and used to establish new programs to help consumers.

Ms. Thomas stated that the Nevada Block Grant funding is creating new programs. She stated that money would be awarded to consumers through RFP's at an August

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meeting. The Council hopes to expand the Council by 3 individuals to support and tackle more issues.

Dr. Kevin Crowe introduced Alyce Thomas as the new Statewide Consumer Services Assistance Coordinator, effective June 12, 2002. This is a new formal consumer assistance program that will involve consumers in the work of the Division. This program expects to be fully staffed by mid-July, with seven full-time positions statewide.

ACTION: Dr. Crowe stated that the Commission would receive regular updates on the Consumer Services Assistance Program.

The Commission congratulated Ms. Thomas on her new position and welcomed her to the Division.

SW LICENSING BOARD F/U RE: SCOPE OF WORK

Dr. Rosin stated that there has been no further formal communication with the Social Work Board since their last meeting and stated that their next meeting was July 12, 2002.

Dr. Rosin stated that he spoke with Ms. Rose Tuana, Administrator for the Social Work Board, on June 10, 2002. Dr. Rosin stated that he had listened to many suggestions for changes to the QMP forms and decided to make no further changes until direction from the Social Work Board. There have been no internal changes to the form at this time.

Dr. Rosin stated that concerns have been expressed with Social Workers taking data/read outs from the vital sign equipment.

Dr. Rosin stated that the Nursing Board does not believe the vital information format should be in the purview of social workers. Dr. Rosin stated that they are waiting for a written statement from the Executive Director of the Nursing Board.

Dr. Rosin stated that Monte Vista, because of the QMP issue, has backed out of Medicare funding and as of June 1, 2002, is no longer accepting Medicare patients. This is a direct result of not being able to resolve the QMP issue.

Dr. Albers read into the record a letter from the Nursing Board, indicating that the opinion of the Committee is that completion of the Emergency Medical Interview Form, as presented at the meeting, requires the knowledge, skill, and ability of a registered nurse, advanced practice nurse, or physician. The QMP form is within the nursing scope of practice and is not within the scope of practice for social workers, psychologists or other qualified medical personnel.

Dr. Albers questioned if the process needed to be revised, if southern Nevada wanted to pursue the issue of having the forms filled out by individuals other than individuals outlined in the nursing letter.

Dr. Brandenburg stated that he would work with Dr. Rosin and legal counsel to review the bylaws and make the necessary changes. Dr. Brandenburg thanked Dr. Albers for

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his help on this issue. Dr. Brandenburg stated that the Division would proceed with a standardized manner for completion of the screening form and the screening forms would be completed only by registered nurses.

RESPONSE FROM STATE BOARD OF PHARMACY

Dr. Rosin stated that they have prepared a document, which is waiting for review and response from the Department of Health. This document is relative to how medications are prescribed and dispensed in rural areas. The Board of Pharmacy is waiting for the response from the Department of Health. If the Department of Health approves the document, the Pharmacy Board will make adjustments to their rules and regulations on a short-term basis. A bill draft has been submitted by the Division on this issue.

STATEWIDE MEDICAL DIRECTOR'S REPORT

Dr. Rosin stated that Dr. Ira Pauly has returned and has accepted the NNAMHS Medical Director position. Dr. Rosin feels that this is a positive step for NNAMHS.

Dr. Rosin stated the NNAMHS status of recruitment is that of a relative short crisis of staffing. Dr. Rosin stated that recruitment in the north continues. He stated that the south has eight (8) contracted doctors with one additional contract doctor willing to help out. Dr. Rosin stated that 18 psychiatric positions have been filled, and that SNAMHS expects to by fully staffed by July.

Dr. Brandenburg reported that Dr. Rosin had taken a leadership role in the recruitment and staffing and had done an excellent job.

Chair Brown, on behalf of the Commission, acknowledged Dr. Rosin's hard work in the recruitment of staff.

AGENCY DIRECTORS' REPORTS

SNAMHS

Dr. Rosin stated that SNAMHS has expanded their emergency psychiatric services from 10 to 20 beds, with no additional resources. SNAMHS has reorganized the hospital, using all four units, and have been able to switch into a recovery model. This is a positive step toward accreditation.

Upon questioning, Dr. Rosin stated that clients are kept for up to 72 hours in that setting, are attempting to return the clients to the community, and medications are administered over a 3-day period for stabilization. The clients are receiving a stronger period of assessment and rapid treatment.

Dr. Rosin stated that the second issue is that SNAMHS has disbursed the Assaultive Behavior (AB) skilled staff throughout the inpatient services. Whether or not there will be identified behavioral units will be determined in the near future.

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Dr. Nora commented that the issue of accountability and continuum of care is wonderful news. Dr. Nora stated that she is very excited to hear about the new staff and positive changes.

Dr. Richitt questioned the NAMI article and if the Division is going to respond to the article. Dr. Brandenburg stated that Dr. Rosin has been directed to draft a letter in response to the article.

ACTION: The NAMI article and response are to be placed on the next Commission agenda for review.

DISCUSSION RE: DIVISION POLICY TO MANDATE SUICIDE PREVENTION TRAINING

Dr. Nora stated that there is a need for suicide prevention training. She stated that based on the training report, there is no tracking of suicide prevention training, as suicide prevention training is not mandated. Dr. Nora stated that in 2001, there was only one agency (SNAMHS) that conducted suicide prevention training. She reported that Nevada has more completed deaths by suicide, more than any other car deaths, and more completed suicides by Nevada natives.

Dr. Nora proposed education/training for two hours of suicide prevention for the renewal of a license and for new employees. Dr. Nora stated that the training is needed now.

ACTION: Dr. Brandenburg stated that at the next Commission meeting, he would present a full report of the suicide prevention training that is currently ongoing statewide and the annual certification. Dr. Brandenburg stated that suicide prevention training is currently part of the employee training.

Upon questioning by Mr. Ward, Dr. Brandenburg stated that suicide prevention training has been mandated for the last year and requires more than two hours.

Dr. Richitt stated that she would need to review additional information/data regarding individuals in treatment and the number of suicides before she could support additional training. Dr. Albers suggested that the Commission pursue this issue further and take a leadership role in this area.

AUTISM - INTERVENTION

Ms. Crandy distributed a handout for the southern meeting location. Ms. Crandy, Co-President and Founder Families for Effective Autism Treatment (FEAT) of Southern Nevada, member of the Clark County School District Parent Autism Council, member of the State Board of Education Special Education Advisory Committee, member of the Independent Living Council and Co-Chair of the Nevada Early Childhood Autism Task Force, stated that her daughter (Megan) was diagnosed with autism at the age of three. Currently, Megan is in a regular 2nd grade, has no teacher aide, plays with other children, holds a conversation, and is reading at a 4th grade level. She currently receives ten hours of behavior management each week and that intervention is anticipated to be zero by the end of 3rd grade. Ms. Crandy stated that they intervened

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early, with an out-of-state expert from UCLA, to help her daughter in behavior management. The cost was approximately \$3,000 a month for approximately 35 hours of treatment per week for the first three years.

Ms. Crandy requested that the Commission support Nevada Children's Autism-Spectrum Disorder and Behavior Disorders through a Medicaid waiver to include autism intervention and behavior modification. Researchers believe that today 1 in 150 children have autism. Autism is increasing at a rapid rate. Ms. Crandy stated that there is a need for funding of early intervention. There is also a need for better data collection on autism. Ms. Crandy would like to see funding offered directly to families. She stated that early intervention does help and would like to show the Commission a video at the August meeting to support this statement.

Upon questioning, Ms. Crandy stated that the cause for autism is still unknown and under research.

Dr. Brailsford stated that he would like to view the video showing the progress of children who receive early intervention, and feels that it would be very helpful to the Commission. Dr. Brailsford stated that he has seen the benefits of early intervention first hand.

Chair Brown questioned if this video is available to show to colleagues. Ms. Crandy stated that she just made the video, will clean it up and make it available.

Mr. Ward stated that autism is a critical health issue and would also like to view the video.

ACTION: The Commission will review the Autism Video at the August meeting and review data from MHDS and DCFS.

ACTION: Mr. Ward encouraged MHDS and DCFS to provide the numbers Ms. Crandy has requested. Dr. Brandenburg stated that Dr. Luke has provided data regarding the number of individuals that MHDS is serving that are autistic and have related conditions. Dr. Brandenburg stated that he would make sure that this data is forwarded to Ms. Crandy.

Ms. Crandy stated that there are no codes for behavioral intervention for Medicaid. Dr. Richitt questioned if the Commission has any input to Medicaid for accepting codes for behavioral interventions. Dr. Brandenburg stated, "No".

Mr. Willden stated that within AB 513 – Strategic Plan – autism is being reviewed from the Provider Rates standpoint. Mr. Willden stated that DHR and Medicaid would review recommendations from the Provider Rates Task Force on how to move forward to address the issue. He stated that the Disability Task Force is also reviewing autism, but is having difficulty collecting data. The Disability Task Force will also have autism recommendations within the Strategic Plan. The Strategic Plan will be published by September 1, 2002.

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ACTION: Dr. Fricke offered to provide literature on autism, early diagnosis and early intervention for review/information at the next Commission meeting. Dr. Albers requested that this information be provided in the packet for review prior to the meeting.

CTC ANNUAL RECERTIFICATION

Rosemary Melarkey, MHDS, reviewed the Annual Re-certification for Community Training Centers (CTC) applications. Ms. Melarkey stated that there has been an improvement on the information received from the Training Centers. There has been an increase in training and more integrated employment. There is 500 staff serving approximately 1500 individuals. There are 17 certified CTC's at this time.

Ms. Melarkey recommended that all of the Training Centers be renewed for certification. She stated that two centers needed to provide a fire inspection certification by July 1, 2002. There is also one center that needs a corrective action plan, which was requested by the Division of Wage and Hour by July 1, 2002.

Ms. Melarkey stated that the centers have made great progress and there are many success stories.

ACTION: Ms. Melarkey will provide an updated list of the CTC's and their addresses for the next meeting. Ms. Melarkey will also provide an update of the CTC's that have stipulations.

MOTION: Mr. Ward moved to approve the renewals of re-certification of the CTC's as recommended by Ms. Melarkey, with the stipulations for re-certification pending as stipulated by Ms. Melarkey, seconded by Dr. Richitt. The motion passed unanimously.

Mr. Ward stated that southern Nevada casinos are a model for northern Nevada casinos and would like to put pressure on the northern Nevada casinos to be enclaves.

MHDS ADVISORY BOARDS SOUTH

Stan Dodd, on behalf of Santa Perez, stated that the Southern Advisory Board heard reports from Dr. Rosin on mental health issues on CES and social work issues. On the DS side, there was discussion about expanding the contract for psychiatrists. Desert Regional Center will contract with a second psychiatrist for the developmental center in approximately 2 months. Westview is a provider of service for supportive employment and within the last six months they have employed about 50 people in competitive jobs in the south. Monte Vista is interested in opening a Residential Treatment Center for children (6 to 10 bed facility).

Mr. Dodd stated that the Southern Advisory Board sent a letter to the Department of Motor Vehicles questioning their practice of asking clients about their medications and the schools they have attended. The Department of Motor Vehicles responded that those questions should not have been asked and they will be providing a statewide training for their staff on this issue.

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MHDS ADVISORY BOARDS NORTH – NOMINATION – TODD P. ORME; FORM – COMPLIMENTS, COMMENTS AND COMPLAINTS; LETTER TO GOVERNOR GUINN RE: DENTAL HEALTH

Dr. Harold Cook stated that the Northern Board requested that the nomination of Todd P. Orme be approved. Dr. Cook stated that the Compliments, Comments and Complaints Form is still under development and suggestion boxes should be out in the community by the next Board meeting. Dr. Cook stated that the Board approved a letter to Governor Guinn with respect to dental procedures covered by Medicaid.

MOTION: Dr. Brailsford moved to approve Todd P. Orme as a board member to the Northern Advisory Board, seconded by Dr. Nora. The motion passed unanimously.

AGENCY DIRECTORS' REPORTS

Mr. Ward requested Lakes Crossing Center's perspective on the litigation regarding seclusion. Dr. Betsy Neighbors responded that they have been providing testimony in federal court for two days regarding a program that was instituted at Lakes Crossing in late 1999. The issue is whether the protective intervention program constitutes a formal seclusion of the individual, which is not the case. Dr. Neighbors stated that the program is used to support individuals in a much less restrictive way to be able to function. She reviewed the population of individuals housed at Lakes Crossing. Dr. Neighbors stated that they receive their clients from the courts/jails. The program has been used sparingly over the past three years. Dr. Neighbors stated that Lakes Crossing is being asked to refrain from using the restraint program. The program keeps individuals separate from others, which may be violent to themselves and/or others. Dr. Neighbors stated that an oral ruling by the Judge is due by Thursday, June 20, 2002.

There were no other comments for Agency Directors.

PUBLIC COMMENTS: There were no public comments in the South. In the North, there was one individual who wished to comment. Chair Brown asked Mr. Jack Mayes to come back after lunch to deliver his comments.

A lunch break was granted at 12:50 P.M. The meeting reconvened at 1:35 P.M.

CONSUMER SATISFACTION SURVEY UPDATE

Dr. Kevin Crowe stated that this survey was developed to collect information about services from consumers. He stated that this is a large-scale consumer involvement survey.

ACTION: Commissioners Dr. Brailsford, Dr. Nora, Dr. Fricke and Dr. Richitt requested that Dr. Crowe mail them a copy of the Consumer Satisfaction Survey Packet.

Dr. Crowe stated that the first survey showed how outdated the consumer information database was. He stated that across the surveys there were positive responses, but a

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poor response rate. Dr. Crowe stated that they are increasing the response rate. The inpatient surveys are collected through the performance improvement staff. The surveys are collected and batched each month, analyzed, and reported quarterly and annually beginning next summer. Approximately 12,000 outpatient surveys are disturbed every six months. The results will be to the Agency Directors by September 30, 2002. The Agency Directors have 90 days to review and respond. The Consumer Assistance Program will be involved in the outpatient surveys to further refine procedures. The survey is being translated into Spanish and there may be a need for the survey in other languages. There are two different surveys in the rural clinics, one for the families and one for youth.

Dr. Crowe reported that the most recent annual reports are on the Division's web site.

ACTION: Mr. Ward requested a copy of the outpatient survey summary for review at the Commission's October meeting.

Upon questioning, Dr. Crowe stated that the outpatient surveys are handed out at the time of an appointment. This also allows for a chance to follow-up with consumers.

INFORMATIONAL

Dr. Brandenburg reported that their Commission packets included:

- Reappointment letter of Dr. Eric Albers to the Commission;
- Appointment letter of David Ward as Chair to the Commission;
- Looking At Ourselves, Linking with Our Communities, Building a Unified Vision for Public Health in Nevada;
- Gambling and Problem Gambling in Nevada;
- Gambling and Problem Gambling Among Adolescents in Nevada; and
- Sexual Exploitation: Strategies for Prevention and Intervention.

Mr. Ward questioned if regulations needed to be developed in the area of sexual exploitation. Dr. Brandenburg suggested that the Commission review the Maryland Report. He stated that MHDS would not be taking the lead on this issue, as this issue crosses over the jurisdiction of numerous boards.

Dr. Nora stated that this is the first time that the State of Nevada has undertaken a survey on gambling. She stated that the report indicates that 6.4 % of Nevadans have a gambling problem as compared to the 2.1% – 4.9% national average. There are only three treatment centers in Nevada. Dr. Nora questioned what the next step should be.

ACTION: Dr. Brandenburg will ask Jonathan Andrews to address the specifics of the report and the next steps. The Gambling Report was a DHR sponsored survey.

STATUTES W/CROSS-REFERENCE REGARDING COMMISSION DUTIES

Deputy Attorney General Irvin stated that he had provided a document listing the Statutes wherein the Commission is referenced and the statutory duties of the Commission.

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Dr. Richitt thanked Mr. Irvin for this information.

ACTION: Dr. Brailsford requested that the Commission review NRS 433.316 – Commission Powers, at the next meeting.

UDPATE RE: LETTERS TO FACILITIES CONCERNING DENIALS AND S/R

Deputy Attorney General Irvin stated that he was successful in receiving responses from facilities with regards to denials and seclusion/restraint policies.

DISCUSSION/ACTION REGARDING LEGISLATIVE PRIORITIES

Mr. Ward requested that this be placed on the agenda to have the opportunity to discuss legislative priorities.

The Commission discussed the possibility of requesting an MHDS staff person be assigned to write grants. It was felt that a grant writer would write grants that would bring in additional revenue to the Division for programs. The Commission agreed that a grant writer would be a positive addition to the Division. Dr. Albers stated that there are a lot of federal monies out there in the area of mental health.

The Commission discussed how to move forward with this idea. They agreed to first present the idea to Mr. Willden and then approach a Legislator, if turned down by Mr. Willden.

ACTION: Mr. Ward will approach Mr. Willden for the addition of a grant writer. Mr. Ward will send a report to Commissioners and provide a report at the next meeting. Dr. Albers requested a heads up on bill draft requests that are to be discussed at the Legislature to be able to be ready to provide input and be more publicly involved.

POLICIES/PROCEDURES OF FACILITIES

Dr. Nora stated that this agenda item was requested because it was unclear as to what policy a facility was following. Dr. Nora stated that the facilities are in compliance with having policies and procedures in place for seclusion and restraints. Dr. Nora stated that some policies differ from agency to agency. She stated that this was a good reference when reviewing the seclusion and restraints.

Dr. Richitt stated that she reviewed the policies and felt that it would be helpful to have the policies to determine what rules that facility is following. Dr. Richitt wanted to see the policy used at Lakes Crossing in the denial of rights by using medication. Dr. Rosin stated that policies used at Lakes Crossing are the policies used in other state facilities.

The Commission discussed what should be done when there is a discrepancy on the form. They discussed making the forms consistent with the policy.

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Deputy Attorney General Irvin suggested that the Commission communicate with the facilities/hospitals to improve the form and invite them to discuss the forms and policy with the Commission.

Dr. Brailsford suggested highlighting the discrepancies and requesting the hospitals review the forms and policies to make them consistent.

ACTION: Dr. Nora will make an informal call to Lake Mead and Monte Vista and inquire about the inconsistency in the forms and policies. Dr. Richitt will contact Dr. Peterson regarding their forms and policies.

ACTION: Mr. Ward stated that Deputy Attorney General Irvin would be sending a letter to the facilities thanking them for providing their policies.

ACTION: Mr. Ward stated that Mr. Irvin will be sending another letter and requesting the facilities seclusion and restraint forms for Commission review.

REPORT FROM MHDS COMMISSIONERS/ROUND TABLE DISCUSSION

Chair Brown stated that this was her last Commission meeting, as her term expires on June 30, 2002. She stated that she appreciated the opportunity to serve on the Commission and act as Chair. She wished the Commission well and stated that Mr. Ward would serve as the Commission Chair beginning with the August meeting.

Dr. Nora thanked Chair Brown for her leadership on the Commission. Dr. Richitt thanked her for her service on the Commission. Mr. Ward thanked Chair Brown for performing an excellent job leading the Commission to its most productive period. Dr. Brailsford stated that the last 1½ years had been a pivotal point and commended her for a job well done.

Upon questioning by Chair Brown, Dr. Brandenburg stated that names have been submitted by the Nursing Board and those names have been forwarded to the Governor's Office for consideration and appointment to the Commission.

Chair Brown closed the public meeting at 2:45 P.M. The Commission moved to the Closed Session of the meeting.

The Commission returned from the Closed Session of the meeting at 3:40 P.M.

The Commission discussed the video teleconferencing option for meetings. The Commission discussed having all the Commissioners be at the meeting location. Budget concerns regarding video teleconferencing were discussed. Ms. Hosselkus stated that the Agency Director's prefer the video teleconferencing and there is the possibility to pay for the video teleconferencing from the savings of the Agency Director's travel budget. Ms. Hosselkus stated that the Health Division is installing a video teleconference system that will be available for MHDS use.

The October meeting will be a two-day meeting in Carson City with the availability of video teleconferencing for the Agency Directors and public.

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The Commission was in agreement to continue to use the video teleconferencing technology. The Commission agreed that, when possible, the Commissioners are to meet at the designated meeting place, but can use the video teleconferencing.

ACTION: Mr. Ward requested that business cards be purchased for Commissioners.

MOTION: Dr. Nora moved to adjourn the meeting at 3:45 P.M., seconded by Dr. Brailsford. The motion passed unanimously.

Respectfully submitted,

Christina Harper Recording Secretary